## **APPLICATION FOR WATER SERVICE**

## Sevier County Water Department

227 Cedar Street Sevierville, TN. 37862 Phone 865-774-3623 or 865-774-3852 Fax: 865-774-3747

www.seviercountywater.com

Section 1 - To be completed by Sevier County Water Dept.

Type Service Requested:	 ∃Residential □Split Tap □	]Commercial	☐Fire Line	□Other
Size:	□3¼" □1" □2" □	"		
Customer #:	□Tap & Set Meter □Tap Only □Meter Only			
Account #:	Tap Fee Paid:		p Fee Paid:	
NEW Service Order #:	Service Fee Paid:			
Section 2 - To be completed by Customer:				
Customer Name:	× .	Date Applied:		
911 Service Address:				
Mailing Address:				
City, State & Zip (mailing):				
Phone #:	Mobile #:			
Email Address:				
Directions:				
Driver License:		0		
I understand that this document is only an APPLICATION for service and no acts on my part, such as plumbing my premises or purchase of equipment, shall in any way obligate the Utility to me. I understand that a pressure-reducing valve may be necessary for my water service and that the Sevier County Water Dept. does not provide nor install said valves and that the Sevier County Water Dept. is not liable for any damages incurred during or as a result of the installation of said valves. I understand that I may not have a cross-connection once I accept service from Sevier County Water Dept.  I understand that billing of water charges will begin upon availability and installation of a water meter, whether or not actual connection is made at the time.				
By my signature, I obligate myself to obey all Water Rules and Regulations, Policies, Requirements, and/or Ordinances adopted and approved by the Sevier County Water Dept. and to pay for all utility services at the prevailing rate schedule of the Sevier County Water Dept. It is further understood that the Utility has the right to make, amend and enforce any Water Rules and Regulations, Policies, Requirements, and/or Ordinances that may be necessary or proper regarding any utility matter. A current copy of above mentioned documents is available upon request.				
Property Owner (Please Print):				
Signature:	X			
Section 3 - To be completed by Sevier County Water Dept.				
METER INFORMATION				

Adjacent Meter #:

Date Completed:

Reading:

Elevation:

Mfg. # (Meter #):

Chlorine Residual:

GPS Coordinates:

Transponder #:

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